FEC FORM 2 STATEMENT OF CANDIDACY

RECEIVED FEC MAIL CENTER

				1 AM 7- EO	
1. (a) Name of Candidate (in full) SHAWNA STERLII	NG		2019	JUN 1 F MIL F GO	
(b) Address (number and street) PO BOX 98	☐ Check if address changed			2. FEC Candidate Identification Number	
(c) City, State, and ZIP Code BROOKSVILLE	KY	41004		3. Is This New Statement (N) OR (A)	
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought PRESIDI	ENTIAL	6. State & Dis	strict of Candidate	
DE	SIGNATION	OF PRINCIPA	L CAMPAIG	N COMMITTEE	
7. I hereby designate the following nan	ned political comm	nittee as my Principa	al Campaign Com		
NOTE: This designation should be f	led with the appro	priate office listed in	the instructions.	(year of election)	
(a) Name of Committee (in full)					
SHAWNA STERLI	NG 2016				
(b) Address (number and street)		<u> </u>			
PO BOX 98					
(c) City, State, and ZIP Code		44004			
BROOKSVILLE	KY	41004			
I hereby authorize the following name candidacy. NOTE: This designation should be formula in the state of the state	·			ommittee, to receive and expend funds on behalf of my	
(a) Name of Committee (in full)		·			
(b) Address (number and street)					
(c) City, State, and ZIP Code					
	nined this Statem	ent and to the best of	of my knowledge	and belief it is true, correct and complete.	
Signature of Candidate				Date	
Showna :	Itale	MI_		Cd 6/2015	
NOTE: Submission of false, erroneous	, or incomplete in	ormation may subject	ct the person sign	ning this Statement to penalties of 52 U.S.C. §30109.	
9-00068			L	FEC FORM 2 (REV. 02/2009	
				FEC FURIN 2 (REV. U2/2009	